

**FEC
FORM 3P****REPORT OF RECEIPTS
AND DISBURSEMENTS**BY AN AUTHORIZED COMMITTEE OF A CANDIDATE
FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

Example: If typing, type over the lines.

12FE4M5

ROMNEY FOR PRESIDENT, INC.

ADDRESS (number and street))

C/O RED CURVE SOLUTIONS, LLC

500 CUMMINGS CENTER, SUITE 4400

Check if different
than previously
reported. (ACC)

BEVERLY

CITY

MA

STATE

01915

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C

C00431171

3. THIS REPORT IS FOR Primary ☐ or General ☐

4. TYPE OF REPORT (Choose One)

Check here if this is a Termination Report (TER) ☐

Quarterly Reports:

Monthly Reports:

- ☐ April 15 (Q1) ☒ October 15 (Q3)
☐ July 15 (Q2) ☐ January 31 Year-End Report (YE)
- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

☐ Thirtieth day report following the General Electionon / / ☐ Twelfth day report preceding electionon / / in the State of

Is this Report an Amendment?



yes



no

5. Covering Period

07

01

2015

through

09

30

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Darrell Crate

Signature of Treasurer

Darrell Crate

[Electronically Filed]

Date

10

15

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.
All previous versions of this form are obsolete and should no longer be used.

Office
Use
Only

Write or Type Committee Name

ROMNEY FOR PRESIDENT, INC.

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2015

To:

MM / DD / YYYY
09 / 30 / 2015**SUMMARY**

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	1790450.46
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3)	43934.50
8. SUBTOTAL (Lines 6 and 7)	1834384.96
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	252647.66
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8.....)	1581737.30
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	0.00
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	0.00
13. EXPENDITURES SUBJECT TO LIMITATION	0.00

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	0.00
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2).....	1976427.43

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 18

FEC Form 3P (Rev. 03/2011)

NAME OF COMMITTEE (in Full)

ROMNEY FOR PRESIDENT, INC.

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 / 01 / 2015

To:

M M / D D / Y Y Y Y
09 / 30 / 2015

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized	0.00	0.00
(ii) unitemized	0.00	0.00
(iii) Total contributions	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d))	0.00	0.00
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate	0.00	0.00
(b) Other Loans	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating	0.00	4188.36
(b) Fundraising	0.00	0.00
(c) Legal and Accounting	0.00	0.00
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c))	0.00	4188.36
21. OTHER RECEIPTS (Dividends, Interest, etc.)	43934.50	1374721.91
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21)	43934.50	1378910.27

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 03/2011)

of Disbursements and Contributed Items

PAGE 4 / 18

NAME OF COMMITTEE (in Full)

ROMNEY FOR PRESIDENT, INC.

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 / 01 / 2015

To:

M M / D D / Y Y Y Y
09 / 30 / 2015**II. DISBURSEMENTS****COLUMN A**
Total This Period**COLUMN B**
Calendar Year-to-Date

23. OPERATING EXPENDITURES.....	249647.66	1980615.79
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0.00	0.00
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0.00	0.00
(b) Other Repayments	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)).....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c))	0.00	0.00
29. OTHER DISBURSEMENTS	3000.00	17000.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	252647.66	1997615.79

III. CONTRIBUTED ITEMS
(Stock, Art Objects, Etc.)

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00	
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FEC FORM 3P,
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

**ALLOCATION OF PRIMARY EXPENDITURES
BY STATE FOR
A PRESIDENTIAL CANDIDATE**
(Used Only by Primary Committees Receiving
or Expecting To Receive Federal Funds)

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C C00431171

ROMNEY FOR PRESIDENT, INC.

ADDRESS (number and street)

C/O RED CURVE SOLUTIONS, LLC

500 CUMMINGS CENTER, SUITE 4400

BEVERLY

CITY

MA

STATE

01915

ZIP CODE

3. NAME OF CANDIDATE

ALLOCATION BY STATE

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama	0.00	0.00
Alaska	0.00	0.00
Arizona	0.00	0.00
Arkansas	0.00	0.00
California	0.00	0.00
Colorado	0.00	0.00
Connecticut	0.00	0.00
Delaware	0.00	0.00
District of Columbia	0.00	0.00
Florida	0.00	0.00
Georgia	0.00	0.00
Hawaii	0.00	0.00
Idaho	0.00	0.00
Illinois	0.00	0.00

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Indiana	0.00	0.00
Iowa	0.00	0.00
Kansas	0.00	0.00
Kentucky	0.00	0.00
Louisiana	0.00	0.00
Maine	0.00	0.00
Maryland	0.00	0.00
Massachusetts	0.00	0.00
Michigan	0.00	0.00
Minnesota	0.00	0.00
Mississippi	0.00	0.00
Missouri	0.00	0.00
Montana	0.00	0.00
Nebraska	0.00	0.00
Nevada	0.00	0.00
New Hampshire	0.00	0.00
New Jersey	0.00	0.00
New Mexico	0.00	0.00
New York	0.00	0.00
North Carolina	0.00	0.00
North Dakota	0.00	
Ohio	0.00	0.00
Oklahoma	0.00	0.00
Oregon	0.00	0.00
Pennsylvania	0.00	0.00

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Rhode Island	0.00	0.00
South Carolina	0.00	0.00
South Dakota	0.00	0.00
Tennessee	0.00	0.00
Texas	0.00	0.00
Utah	0.00	0.00
Vermont	0.00	0.00
Virginia	0.00	0.00
Washington	0.00	0.00
West Virginia	0.00	0.00
Wisconsin	0.00	0.00
Wyoming	0.00	0.00
Puerto Rico	0.00	0.00
Guam	0.00	0.00
Virgin Islands	0.00	0.00
TOTALS	0.00	0.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB
.

Form/Schedule: F3PN
Transaction ID :

Disbursements on this report include expenses necessary for the maintenance and wind-down of the Committee.

Form/Schedule:
Transaction ID:

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 / 18

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ROMNEY FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

FLS CONNECT, LLC

Mailing Address 7300 HUDSON BLVD
STE 270

City	State	Zip Code
SAINT PAUL	MN	55128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

16062.50

Transaction ID : SA21.001

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

LIST RENTAL

Amount of Each Receipt this Period

277.78

FAIR MARKET VALUE

B. Full Name (Last, First, Middle Initial)

FLS CONNECT, LLC

Mailing Address 7300 HUDSON BLVD
STE 270

City	State	Zip Code
SAINT PAUL	MN	55128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

16062.50

Transaction ID : SA21.003

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	5

LIST RENTAL

Amount of Each Receipt this Period

5971.92

FAIR MARKET VALUE

C. Full Name (Last, First, Middle Initial)

NEWSMAX MEDIA

Mailing Address 560 VILLAGE BLVD.
STE 120

City	State	Zip Code
WEST PALM BEACH	FL	33409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

98706.32

Transaction ID : SA21.002

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

LIST RENTAL

Amount of Each Receipt this Period

16444.80

FAIR MARKET VALUE

Subtotal Of Receipts This Page (optional).....

22694.50

Total This Period (last page this line number only).....

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

(check only one)

PAGE 10 / 18

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

ROMNEY FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

NEWSMAX MEDIA

Mailing Address 560 VILLAGE BLVD.
STE 120

City State Zip Code
WEST PALM BEACH FL 33409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

98706.32

Transaction ID : SA21.004

Date of Receipt

M M / D D / Y Y Y Y
09 28 2015

LIST RENTAL

Amount of Each Receipt this Period

21240.00

FAIR MARKET VALUE

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Subtotal Of Receipts This Page (optional).....

21240.00

Total This Period (last page this line number only)

43934.50

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

ROMNEY FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. ADVANTAGE SELF STORAGE

Mailing Address 12202 AIRPORT WAY STE 100

City BROOMFIELD State CO Zip Code 80021

Purpose of Disbursement
STORAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 24 / 2015

Transaction ID : SB23.002

Amount of Each Disbursement this Period

273.00

Full Name (Last, First, Middle Initial)

B. ADVANTAGE SELF STORAGE

Mailing Address 12202 AIRPORT WAY STE 100

City BROOMFIELD State CO Zip Code 80021

Purpose of Disbursement
STORAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 24 / 2015

Transaction ID : SB23.006

Amount of Each Disbursement this Period

576.00

Full Name (Last, First, Middle Initial)

C. ADVANTAGE SELF STORAGE

Mailing Address 12202 AIRPORT WAY STE 100

City BROOMFIELD State CO Zip Code 80021

Purpose of Disbursement
STORAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 28 / 2015

Transaction ID : SB23.009

Amount of Each Disbursement this Period

273.00

Subtotal Of Receipts This Page (optional).....

1122.00

Total This Period (last page this line number only).....

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

ROMNEY FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. BARNES AND NOBLE

Mailing Address PO BOX 111

City
LYNDHURST

State
NJ

Zip Code
07071

Purpose of Disbursement
ONLINE SUBSCRIPTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 24 / 2015

Transaction ID : SB23.005

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 450

City
TYSONS CORNER

State
VA

Zip Code
22182

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 19 / 2015

Transaction ID : SB23.013

Amount of Each Disbursement this Period

27500.00

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 450

City
TYSONS CORNER

State
VA

Zip Code
22182

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 14 / 2015

Transaction ID : SB23.017

Amount of Each Disbursement this Period

13750.00

Subtotal Of Receipts This Page (optional).....

41275.00

Total This Period (last page this line number only).....

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 18

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

ROMNEY FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. DOCUSIGN

Mailing Address 221 MAIN STREET

City State Zip Code
SAN FRANCISCO CA 94105

Purpose of Disbursement
ONLINE SUBSCRIPTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 24 / 2015

Transaction ID : SB23.004

Amount of Each Disbursement this Period

509.75

Full Name (Last, First, Middle Initial)

B. GOOGLE

Mailing Address 1600 AMPHITHEATRE PKWY

City State Zip Code
MOUNTAIN VIEW CA 94043

Purpose of Disbursement
NETWORK SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 24 / 2015

Transaction ID : SB23.003

Amount of Each Disbursement this Period

105.00

Full Name (Last, First, Middle Initial)

C. GOOGLE

Mailing Address 1600 AMPHITHEATRE PKWY

City State Zip Code
MOUNTAIN VIEW CA 94043

Purpose of Disbursement
NETWORK SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 24 / 2015

Transaction ID : SB23.007

Amount of Each Disbursement this Period

207.66

Subtotal Of Receipts This Page (optional).....

822.41

Total This Period (last page this line number only).....

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

ROMNEY FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. GOOGLE

Mailing Address 1600 AMPHITHEATRE PKWY

City State Zip Code
MOUNTAIN VIEW CA 94043

Purpose of Disbursement
NETWORK SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 28 / 2015

Transaction ID : SB23.010

Amount of Each Disbursement this Period

105.00

Full Name (Last, First, Middle Initial)

B. IRON MOUNTAIN

Mailing Address PO BOX 27128

City State Zip Code
NEW YORK NY 10087

Purpose of Disbursement
STORAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 19 / 2015

Transaction ID : SB23.014

Amount of Each Disbursement this Period

569.94

Full Name (Last, First, Middle Initial)

C. JONES DAY

Mailing Address PO BOX 7805
BEN FRANKLIN STATION

City State Zip Code
WASHINGTON DC 20044

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 19 / 2015

Transaction ID : SB23.015

Amount of Each Disbursement this Period

15000.00

Subtotal Of Receipts This Page (optional).....

15674.94

Total This Period (last page this line number only).....

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 18

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

ROMNEY FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. MJW CONSULTING, INC

Mailing Address 220 WEST CANTON STREET #1

City BOSTON State MA Zip Code 02116

Purpose of Disbursement
LIST RENTAL CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2015

Transaction ID : SB23.001

Amount of Each Disbursement this Period

77071.93

Full Name (Last, First, Middle Initial)

B. MJW CONSULTING, INC

Mailing Address 220 WEST CANTON STREET #1

City BOSTON State MA Zip Code 02116

Purpose of Disbursement
LIST RENTAL CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2015

Transaction ID : SB23.008

Amount of Each Disbursement this Period

16666.00

Full Name (Last, First, Middle Initial)

C. RED CURVE SOLUTIONS

Mailing Address 138 CONANT STREET
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 14 / 2015

Transaction ID : SB23.011

Amount of Each Disbursement this Period

23015.38

Subtotal Of Receipts This Page (optional)..... 116753.31

Total This Period (last page this line number only).....

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

ROMNEY FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. RED CURVE SOLUTIONS

Mailing Address 138 CONANT STREET
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 14 / 2015

Transaction ID : SB23.012

Amount of Each Disbursement this Period

14000.00

Full Name (Last, First, Middle Initial)

B. RED CURVE SOLUTIONS

Mailing Address 138 CONANT STREET
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 19 / 2015

Transaction ID : SB23.016

Amount of Each Disbursement this Period

30000.00

Full Name (Last, First, Middle Initial)

C. RED CURVE SOLUTIONS

Mailing Address 138 CONANT STREET
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 14 / 2015

Transaction ID : SB23.018

Amount of Each Disbursement this Period

23000.00

Subtotal Of Receipts This Page (optional).....

67000.00

Total This Period (last page this line number only).....

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

ROMNEY FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. RED CURVE SOLUTIONS

Mailing Address 138 CONANT STREET
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 14 / 2015

Transaction ID : SB23.019

Amount of Each Disbursement this Period

7000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Subtotal Of Receipts This Page (optional).....

7000.00

Total This Period (last page this line number only).....

249647.66

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

ROMNEY FOR PRESIDENT, INC.

Full Name (Last, First, Middle Initial)

A. FRIENDS OF KELLY AYOTTE

Mailing Address PO BOX 937

City
MANCHESTER

State
NH

Zip Code
03105

Purpose of Disbursement
FEDERAL CONTRIBUTION - PRIMARY 2016

Candidate Name
KELLY A AYOTTE

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M M / D D / Y Y Y Y
 08 / 25 / 2015

Transaction ID : SB29.001

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

Mailing Address 10 WATER STREET

City
CONCORD

State
NH

Zip Code
03301

Purpose of Disbursement
FEDERAL CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
 09 / 14 / 2015

Transaction ID : SB29.002

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Subtotal Of Receipts This Page (optional).....

3000.00

Total This Period (last page this line number only).....

3000.00